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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: 09629 Practitioners associated with the Customer Number: Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Name Registration Name Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: 09629 The address associated with Customer Number: ORFirm or Individual Name Address State Zip City Country

Assignee Name and Address:

Telephone

FUJIFILM Diosynth Biotechnologies U.S.A., Inc.

101 J. Morris Commons Lane

Morrisville, NC 27560

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SIGNATURE of Assignee of Record
The individual whose signature and title if speplied below is authorized to act on behalf of the assignee

Signature Date 27th July, 2011
Name Christopher Revell Telephone + 44 161 721 1142

Title Authorised Signatory

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